

No. 202. An act relating to the makeup and duties of the Emergency Medical Services Advisory Committee.

(S.241)

It is hereby enacted by the General Assembly of the State of Vermont:

Sec. 1. 18 V.S.A. § 909 is amended to read:

§ 909. EMS ADVISORY COMMITTEE

(a) The Commissioner shall establish an advisory committee to advise on matters relating to the delivery of emergency medical services (EMS) in Vermont.

(b) The Emergency Medical Services Advisory Committee ~~shall be chaired by the Commissioner or his or her designee and shall include the following 14 other members:~~

(1) ~~Four representatives of EMS districts. The representatives shall be selected by the EMS districts in four regions of the State. Those four regions shall correspond with the geographic lines used by the public safety districts pursuant to 20 V.S.A. § 5. For purposes of this subdivision, an EMS district located in more than one public safety district shall be deemed to be located in the public safety district in which it serves the greatest number of people. One representative from each EMS district in the State, each representative being~~ appointed by the EMS Board in his or her district.

(2) A representative from the Vermont Ambulance Association or designee.

(3) A representative from the ~~initiative for rural emergency medical services~~ Initiative for Rural Emergency Medical Services program at the University of Vermont or designee.

(4) A representative from the Professional Firefighters of Vermont or designee.

(5) A representative from the Vermont Career Fire Chiefs Association or designee.

(6) A representative from the Vermont State Firefighters' Association or designee.

(7) ~~An emergency department director of a Vermont hospital appointed by the Vermont Association of Emergency Department Directors or designee.~~

(~~8~~) An emergency department nurse manager or emergency department director of a Vermont hospital appointed by the Vermont Association of ~~Emergency Department Nurse Managers or designee~~ Hospitals and Health Systems.

(~~9~~) ~~A representative from the Vermont State Firefighters' Association who serves on a first response or FAST squad.~~

(~~10~~) ~~A representative from the Vermont Association of Hospitals and Health Systems or designee.~~

(8) The Commissioner or designee.

~~(11)~~(9) A local government member not affiliated with emergency medical services, firefighter services, or hospital services, appointed by the Vermont League of Cities and Towns.

(c) The Committee shall select from among its members a chair who is not an employee of the State.

(d) The Committee shall meet not less than quarterly ~~in the first year and not less than twice annually each subsequent year~~ and may be convened at any time by the ~~Commissioner or his or her designee~~ Chair or at the request of ~~seven~~ 11 Committee members. Not more than two meetings each year shall be held in the same EMS district. One meeting each year shall be held at a Vermont EMS conference.

~~(d)~~(e) Beginning on January 1, 2014 ~~and for the ensuing two years~~ 2019, the Committee shall report annually on the emergency medical services system to the House Committees on Government Operations, on Commerce and Economic Development, and on Human Services and to the Senate Committees on Government Operations, on Economic Development, Housing and General Affairs, and on Health and Welfare. The Committee's ~~initial and ensuing~~ reports shall include ~~each EMS district's response times to 911 emergencies in the previous year based on information collected from the Vermont Department of Health's Division of Emergency Medical Services and recommendations~~ information on the following:

~~(1) whether Vermont EMS districts should be consolidated such as along the geographic lines used by the four public safety districts established under 20 V.S.A. § 5;~~

~~(2)~~(1) whether every Vermont municipality should be required to have in effect an emergency medical services plan providing for timely and competent emergency responses; ~~and~~

~~(3)~~(2) whether the State should establish directives addressing when an agency can respond to a nonemergency request for transportation of a patient if doing so will leave the service area unattended or unable to respond to an emergency call in a timely fashion;:

(3) how the EMS system is functioning statewide and the current state of recruitment and workforce development;

(4) each EMS district's response times to 911 emergencies in the previous year, based on information collected from the Vermont Department of Health's Division of Emergency Medical Services;

(5) funding mechanisms and funding gaps for EMS personnel and providers across the State, including for the funding of infrastructure, equipment, and operations and costs associated with initial and continuing training, licensure, and credentialing of personnel;

(6) the nature and costs of dispatch services for EMS providers throughout the State and suggestions for improvement;

(7) legal, financial, or other limitations on the ability of EMS personnel with various levels of training and licensure to engage in lifesaving or health-preserving procedures;

(8) how the current system of preparing and licensing EMS personnel could be improved, including the role of Vermont Technical College's EMS program; whether the State should create an EMS academy; and how such an EMS academy should be structured;

(9) how EMS instructor training and licensing could be improved; and

(10) the impact of the State's credentialing requirements for EMS personnel on EMS providers.

Sec. 2. 2018 MEETINGS AND ORGANIZATION

Notwithstanding 18 V.S.A. § 909(d), the Emergency Medical Services Advisory Committee shall meet at least twice between July 1, 2018 and December 31, 2018. The Commissioner or designee shall call the first such meeting, at which time a chair shall be selected pursuant to 18 V.S.A. § 909(c).

Sec. 3. EFFECTIVE DATE

This act shall take effect on passage.

Date Governor signed bill: May 30, 2018